

# NC Early Childhood Action Plan

## *Public Health Leaders Conference*

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NCDHHS

January 25, 2019

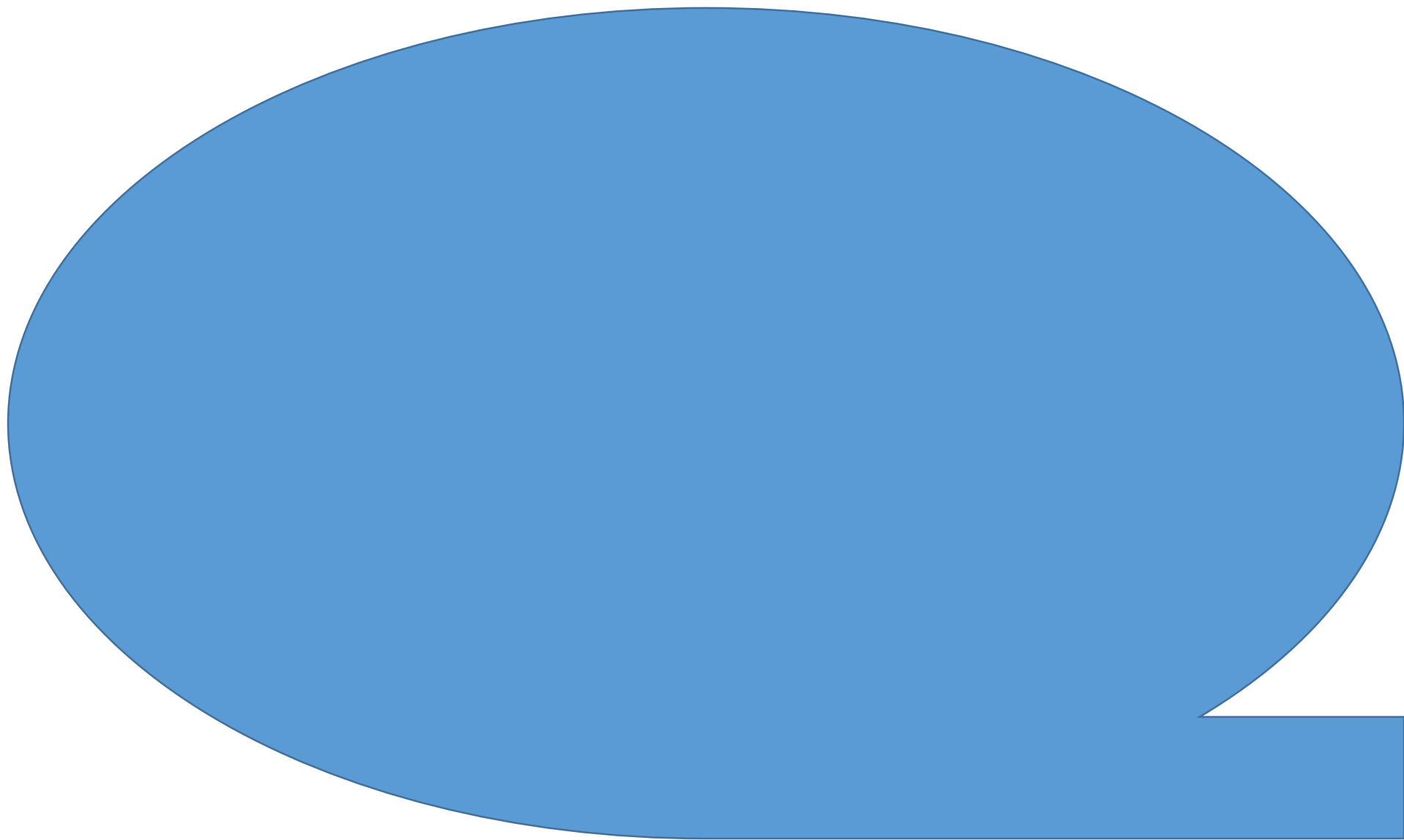
# Overview

1. Why Early Childhood?
2. NC History
3. Early Childhood Action Plan 101
4. Why Now?



A young child with dark, curly hair, wearing a blue and white striped shirt, is focused on playing with a wooden xylophone. The child is surrounded by various colorful toys, including a red plastic container and yellow and red blocks. In the background, a large, colorful, cone-shaped object is visible. The scene is set in a bright, indoor environment, likely a playroom or a classroom.

## Why Early Childhood?





# A Crash Course in Brain Development

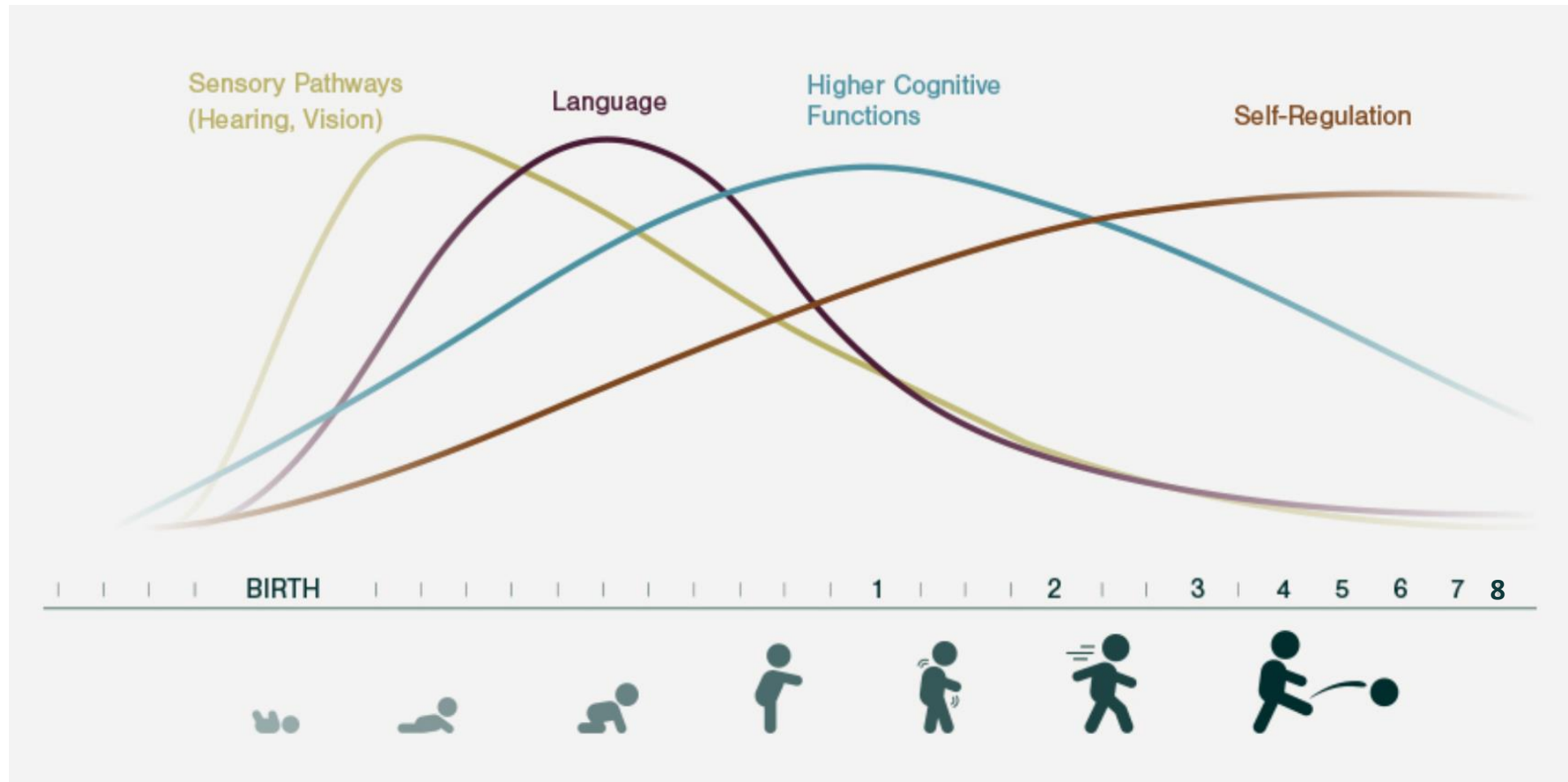
Three Core Concepts in Early Development

## 1 Experiences Build Brain Architecture

NATIONAL SCIENTIFIC COUNCIL ON THE DEVELOPING CHILD

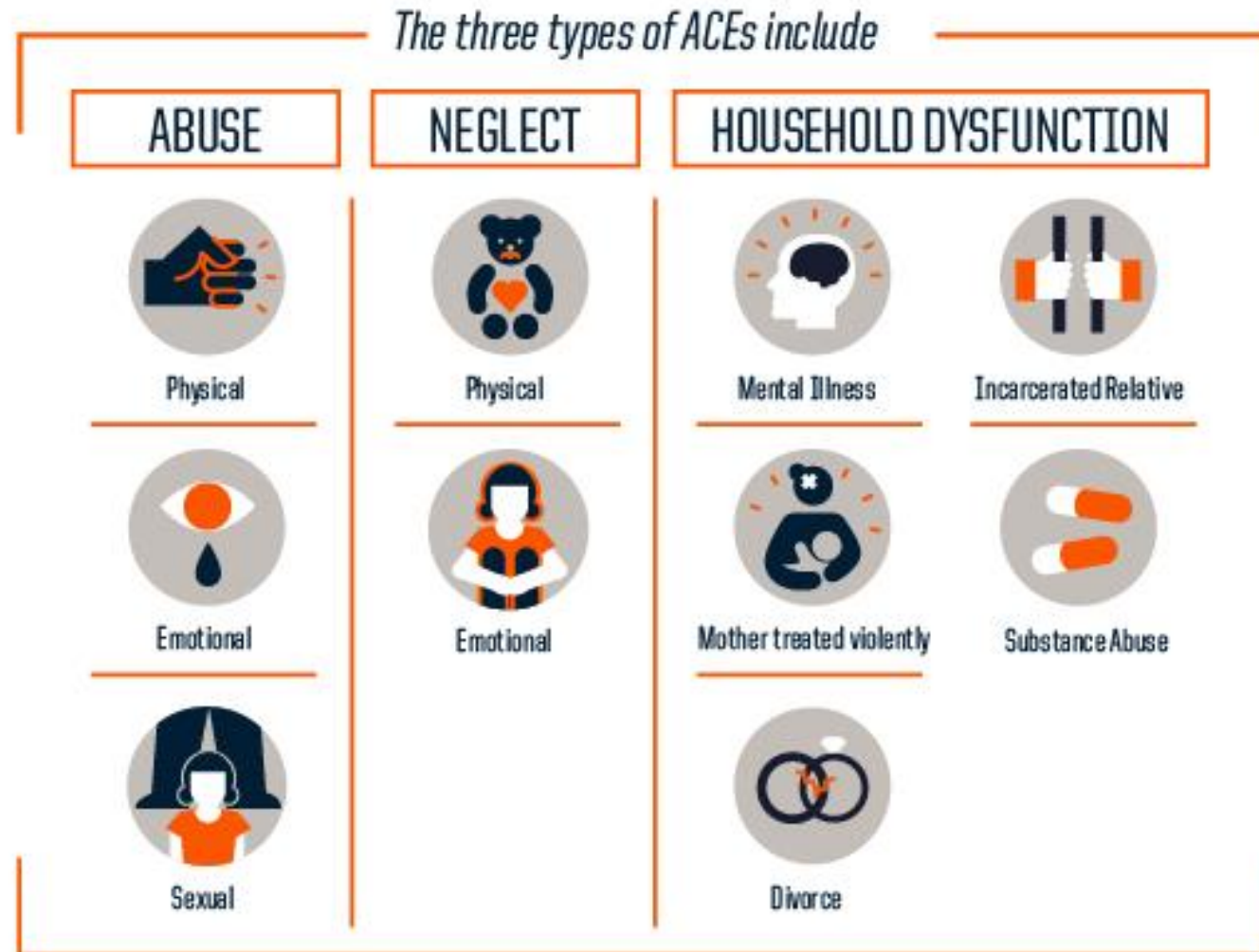
Center on the Developing Child  HARVARD UNIVERSITY

# A Child's Brain Development: First Years



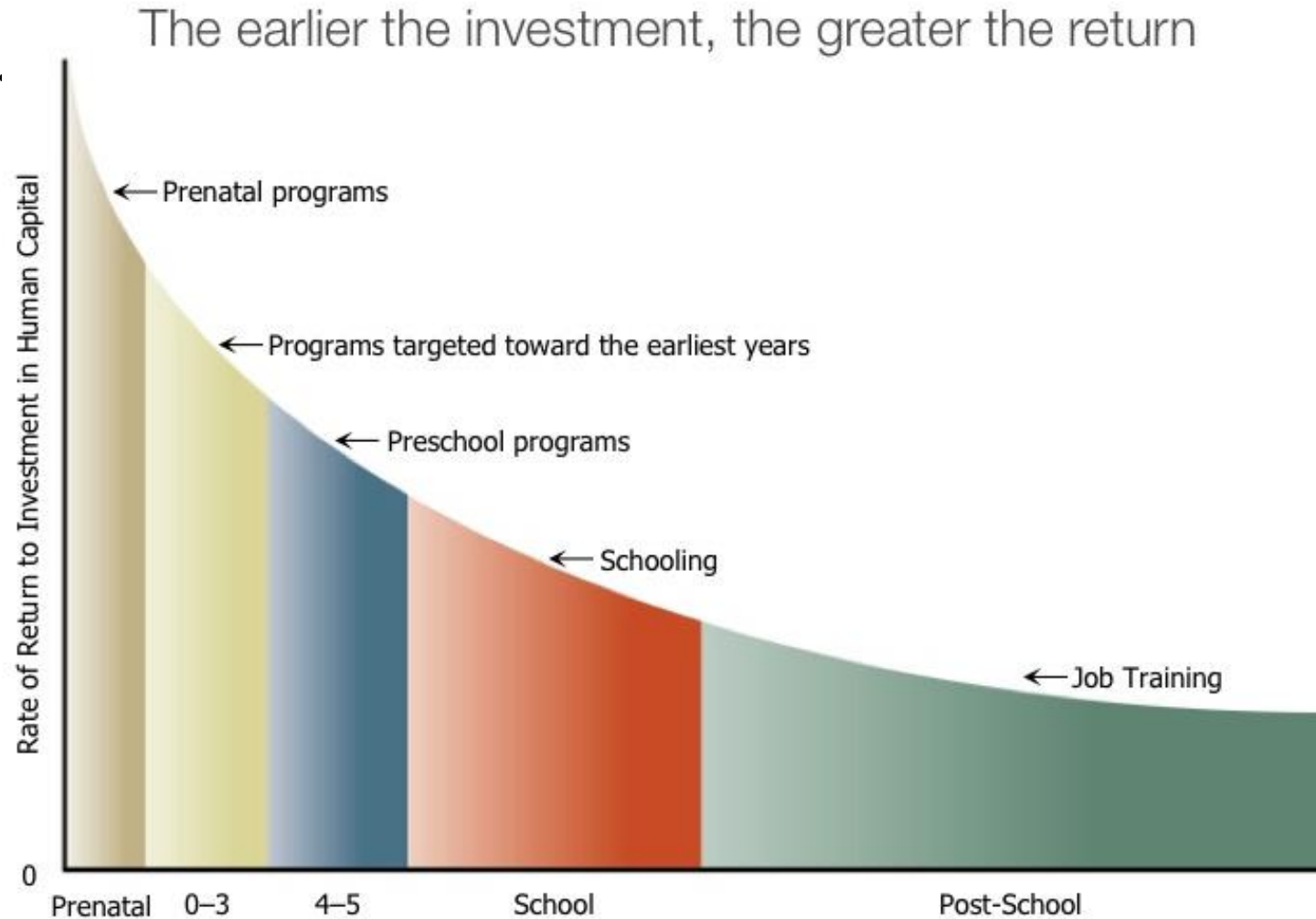
Source: <https://www.packard.org/what-we-fund/children-families-and-communities/why-its-important/>

# Adverse Childhood Experiences (ACEs)



# Invest in Early Childhood Development

- Source: h  
curve/



man-



# Our Early Childhood Lens For Today's Conversation



*Age Range*



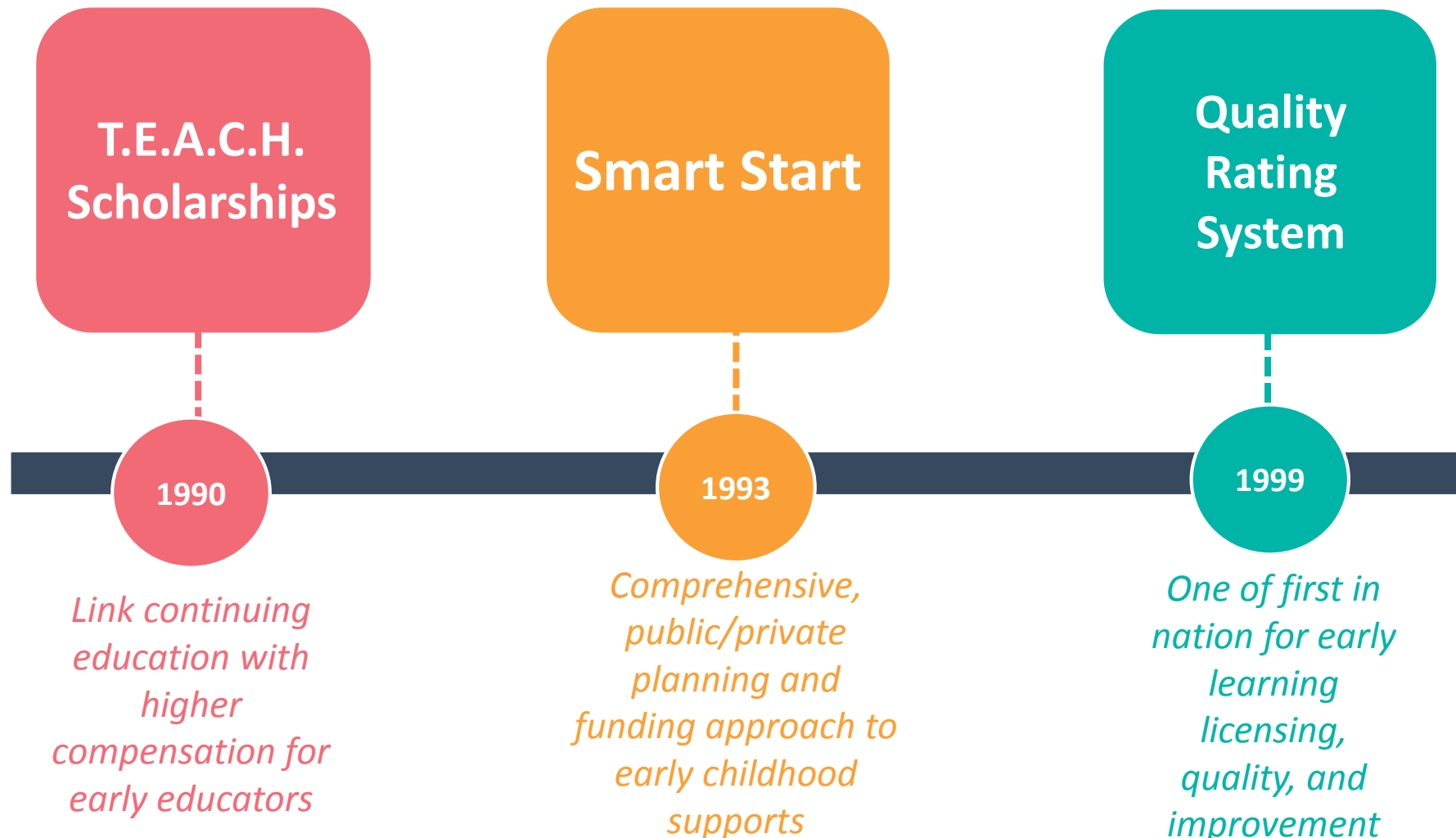
*Health, Child Welfare,  
and Early Education*



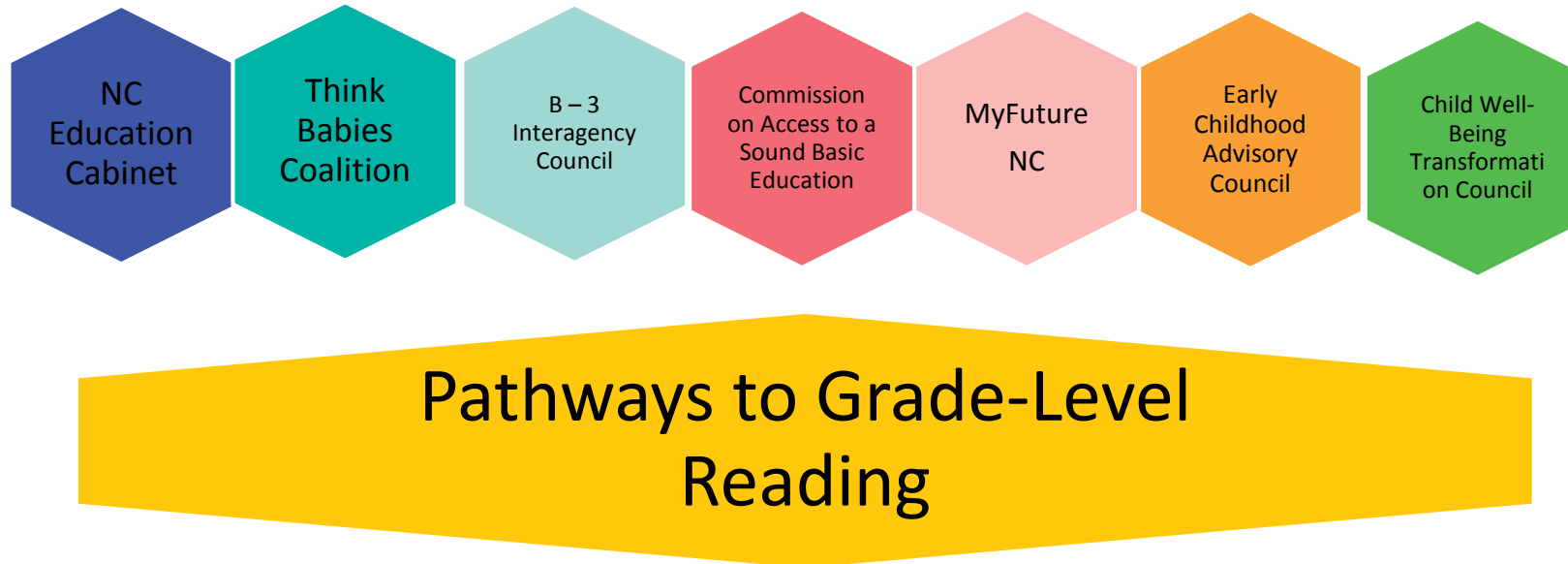
# Early Childhood in NC



# NC's History of Leadership in Early Childhood



# Recent Early Childhood-Affiliated Cabinets, Commissions, and Initiatives in NC





# NC's Challenges for Young Children

## Disparities in Infant Mortality

*African American births face **2.5X** the infant mortality rate of white births in NC*

## Food Insecurity

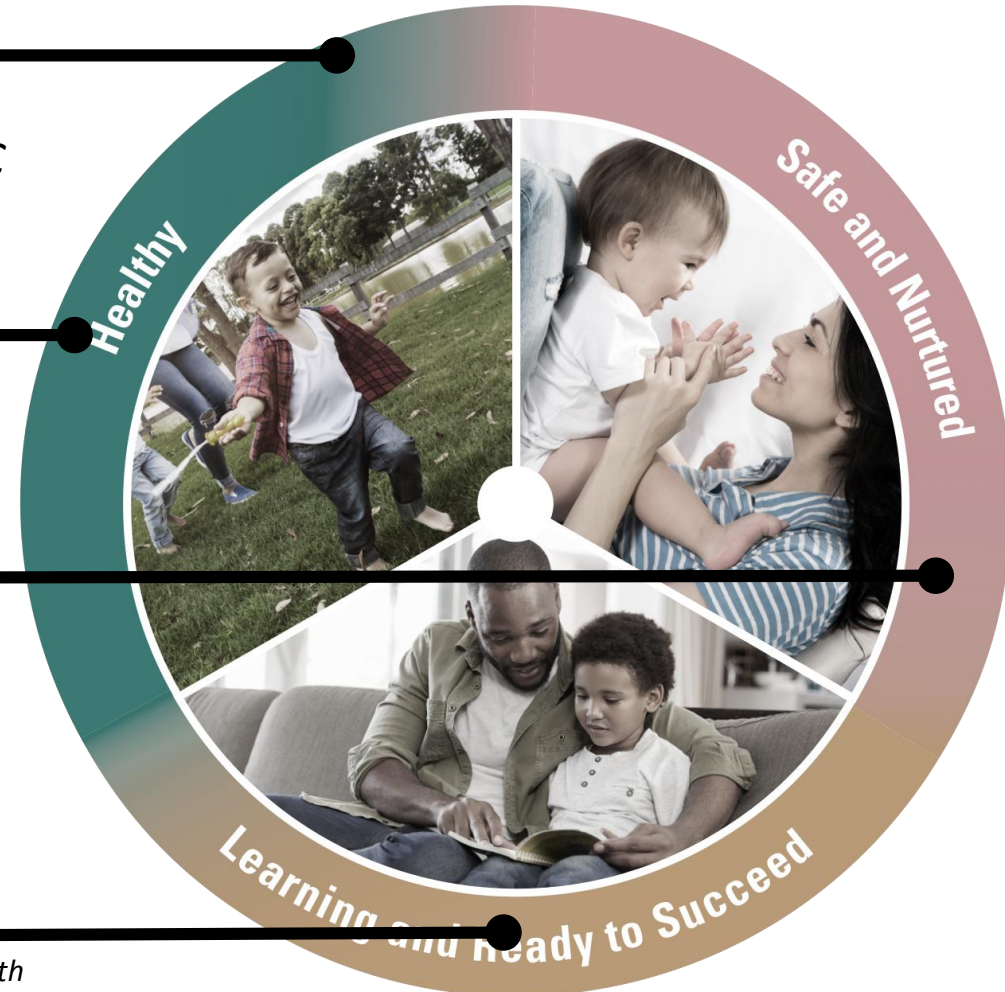
***1 in 5** NC children face food insecurity – bottom 10 states in the nation*

## Children in Foster Care

*Half of NC children ages 6 – 8 in foster care will have spent **over 980** days in the system before they are adopted*

## Reading Proficiency

*In 2017, only **39%** of NC 4<sup>th</sup> graders read proficiently*







# Early Childhood Action Plan 101



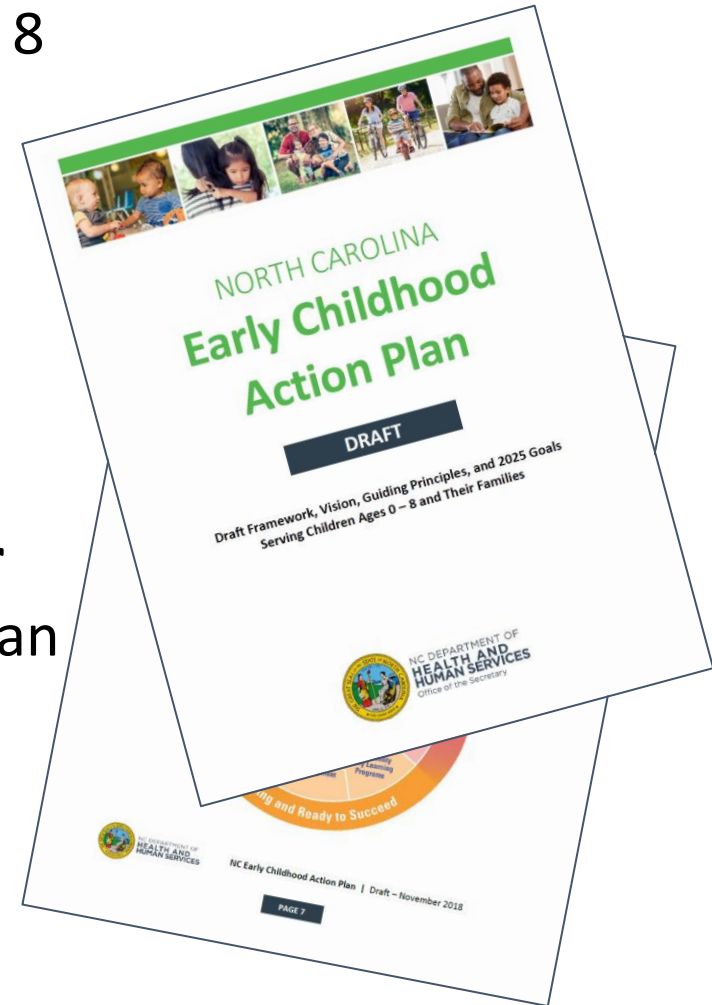


# Our Vision for NC's Children

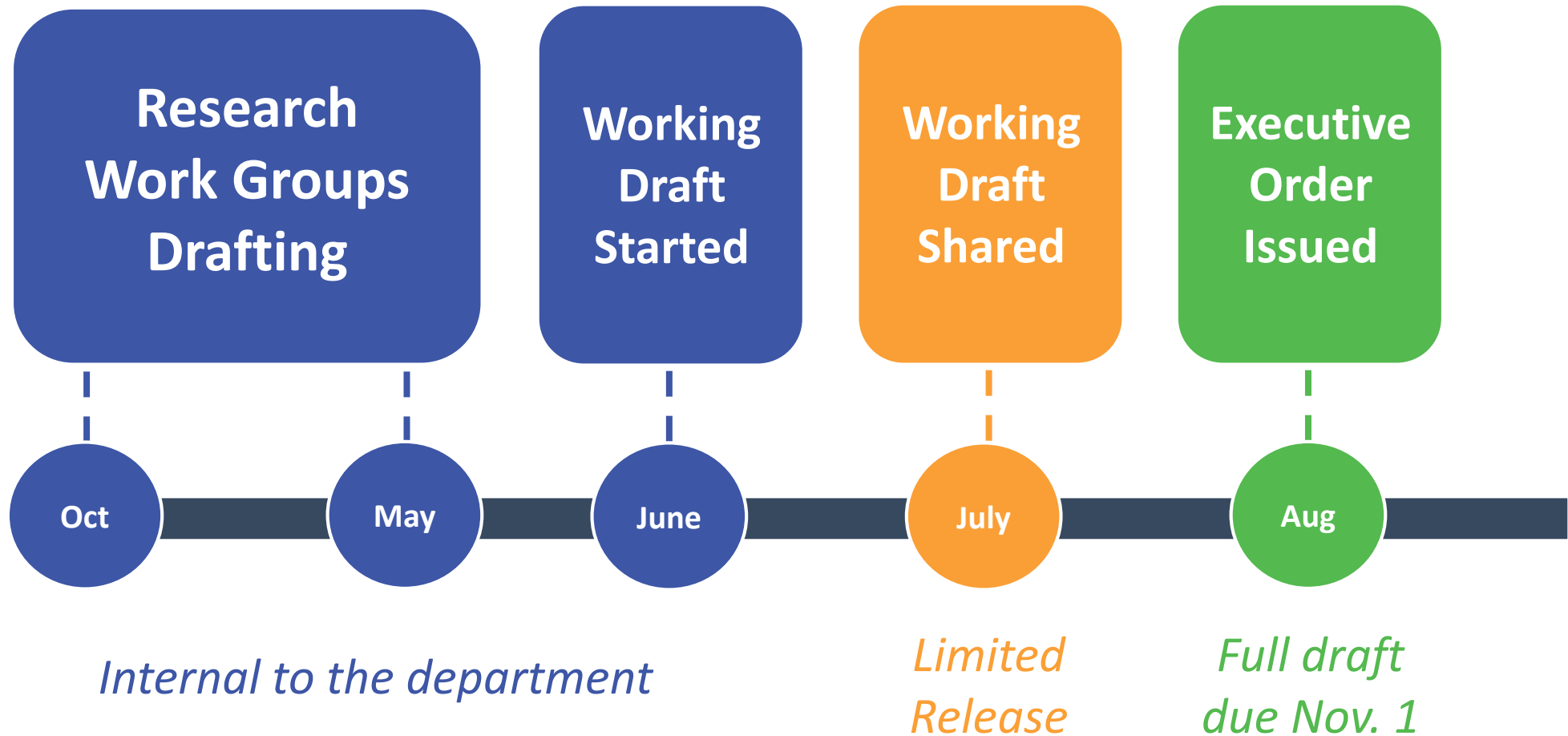
All North Carolina children  
will get a healthy start  
and develop to their full  
potential in safe and  
nurturing families, schools  
and communities.

# What is the NC Early Childhood Action Plan?

- Focuses on families and children ages 0 – 8
- Early childhood is one of the NC Department of Health and Human Services' top priorities– we have been working on creating the foundation of an action plan since October 2017
- DHHS was directed in an **Executive Order by Governor Cooper** to draft an action plan supporting children ages 0-8 across NC in collaboration with the Early Childhood Advisory Council
- Builds on our foundation of early childhood leadership: **Align & Amplify**

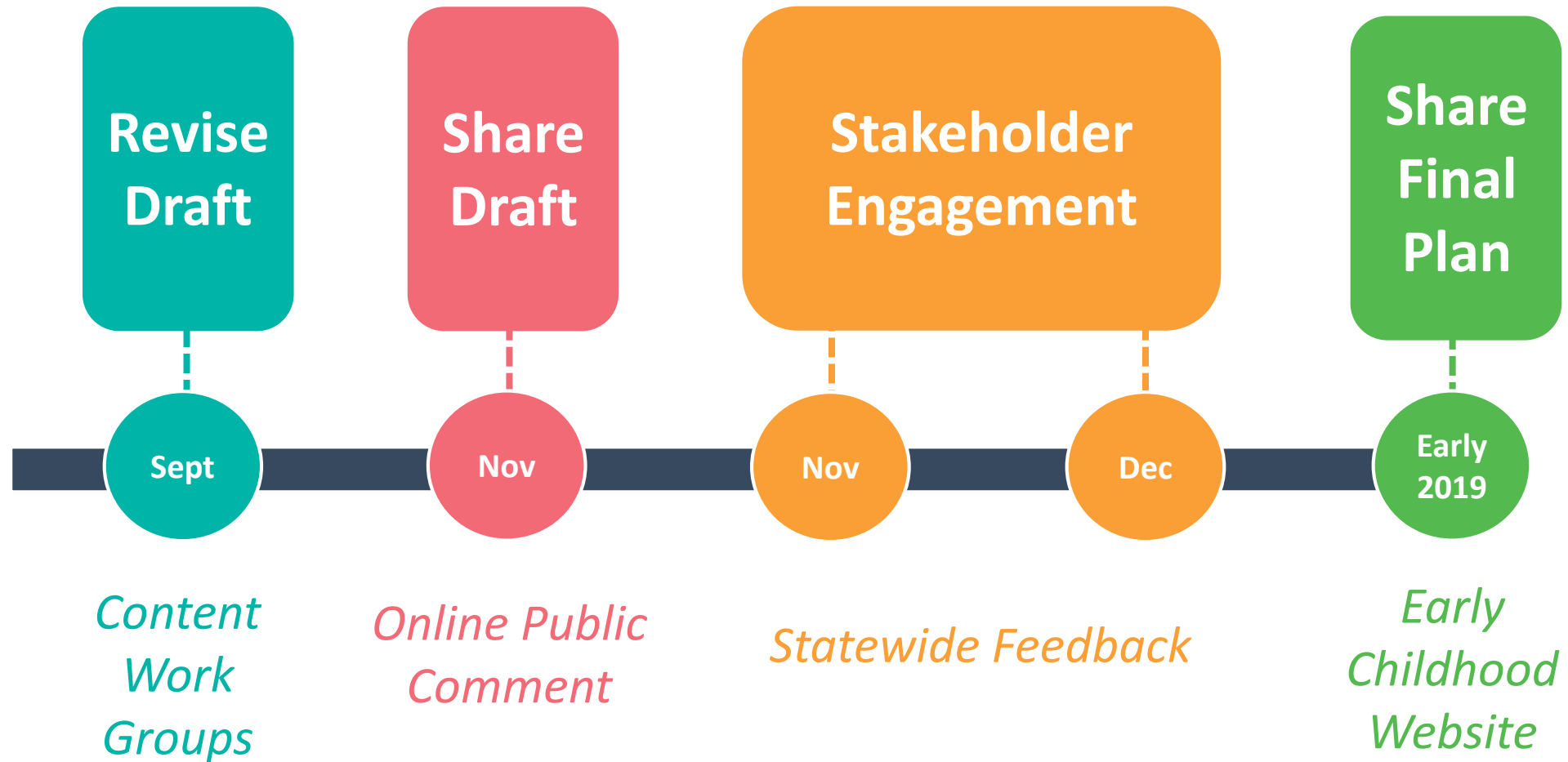


## How We Got Here: 2017 - 2018





## Where we're headed next: 2018 - 2019





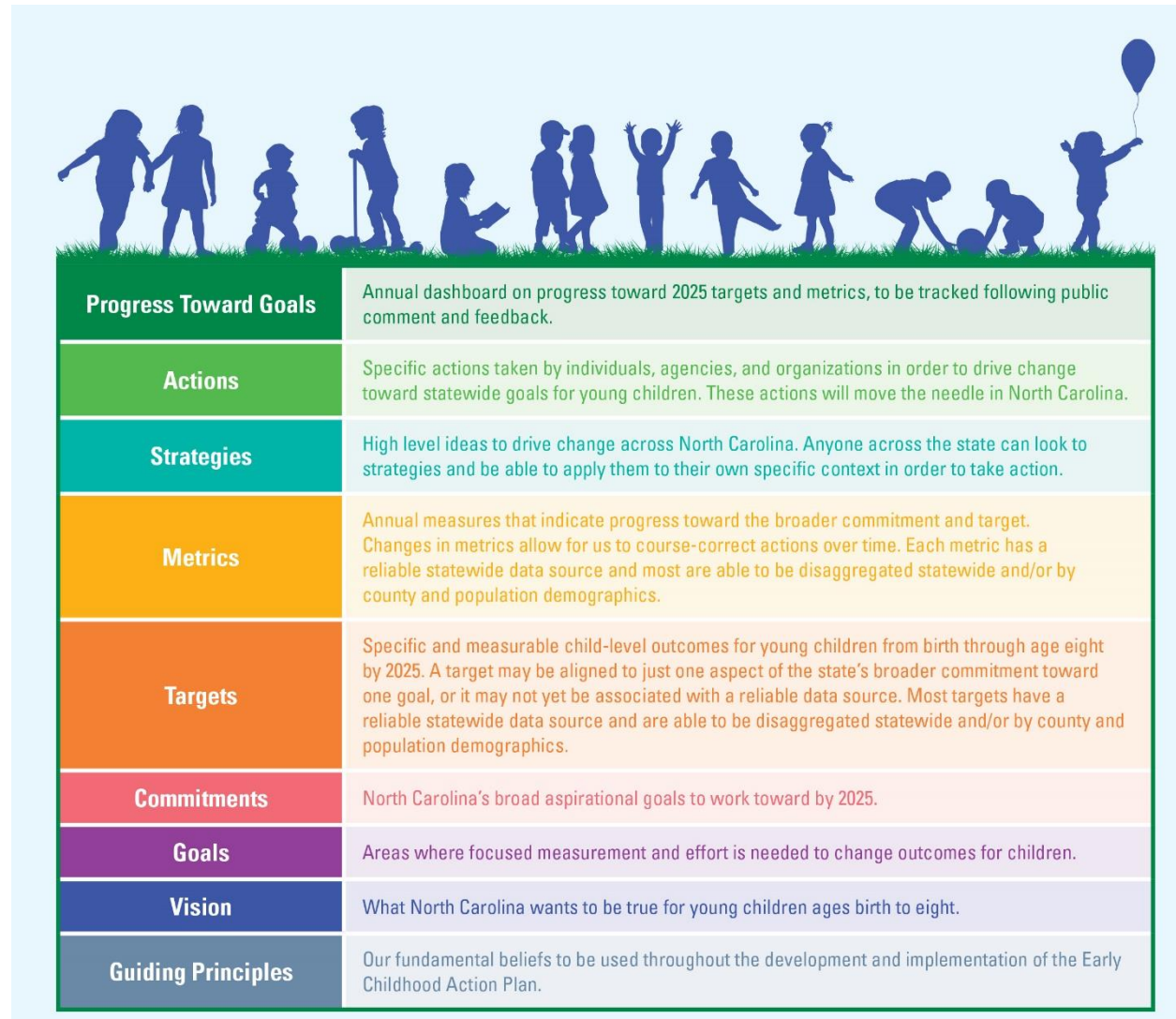
# Feedback/Input



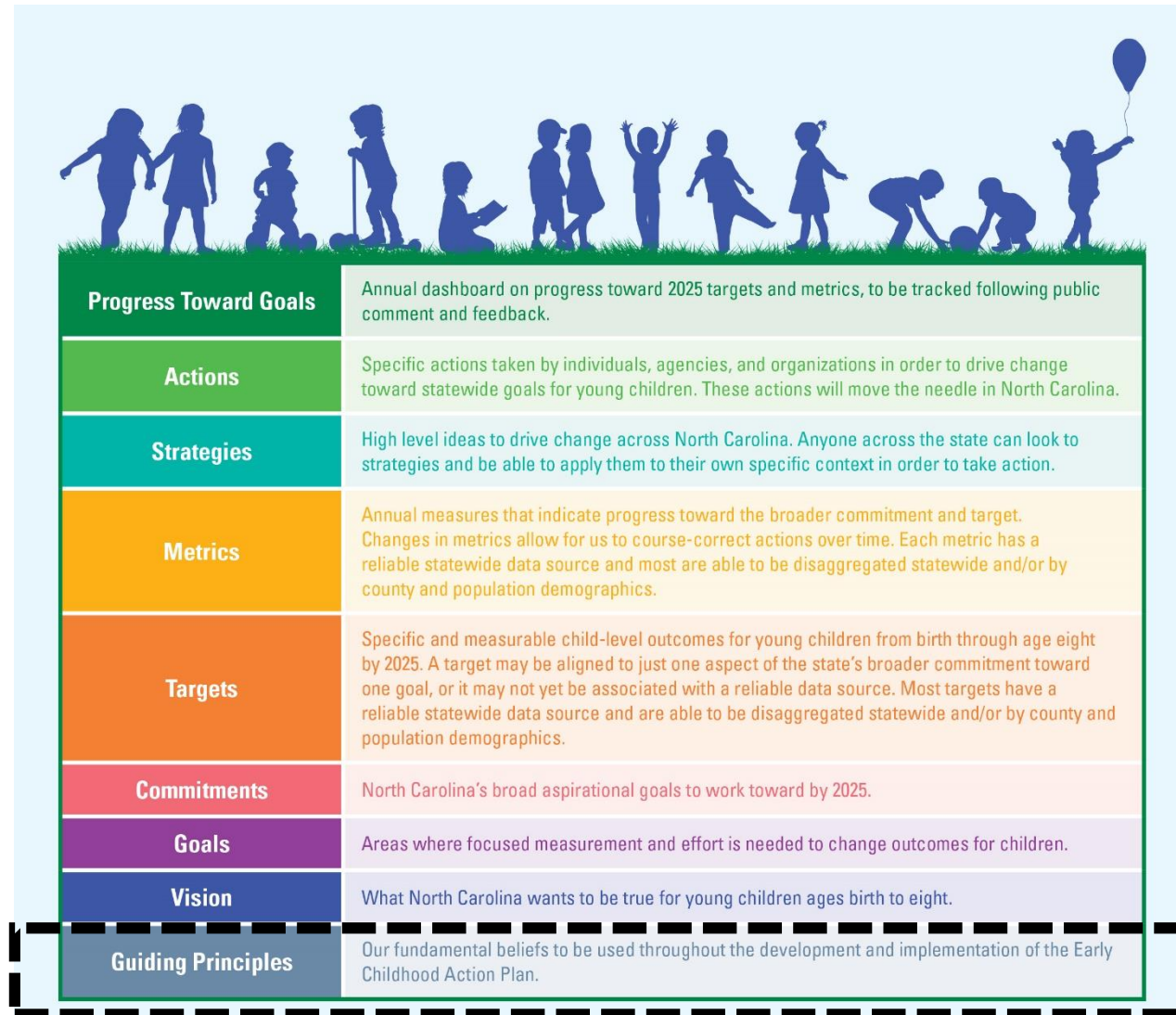
**From October –  
December 2018:**

- Over **200** individual feedback emails received representing many hundreds of perspectives
- Over **30** presentations and dialogue sessions across the state
- Weekly webinar feedback series engaged even more

# Early Childhood Action Plan Framework



# Early Childhood Action Plan Framework




## Guiding Principles – example: Principle #6

**Focus on alleviating inequity to ensure that all of North Carolina's children reach their fullest potential.**

North Carolina is committed to equity of opportunity for all children by confronting disparities through strategic commitments across the state. Child outcomes that vary disproportionately across race, ethnicity, socioeconomic status, physical and developmental ability, and geography must be recognized in order to identify and implement strategic interventions.

# Early Childhood Action Plan Framework

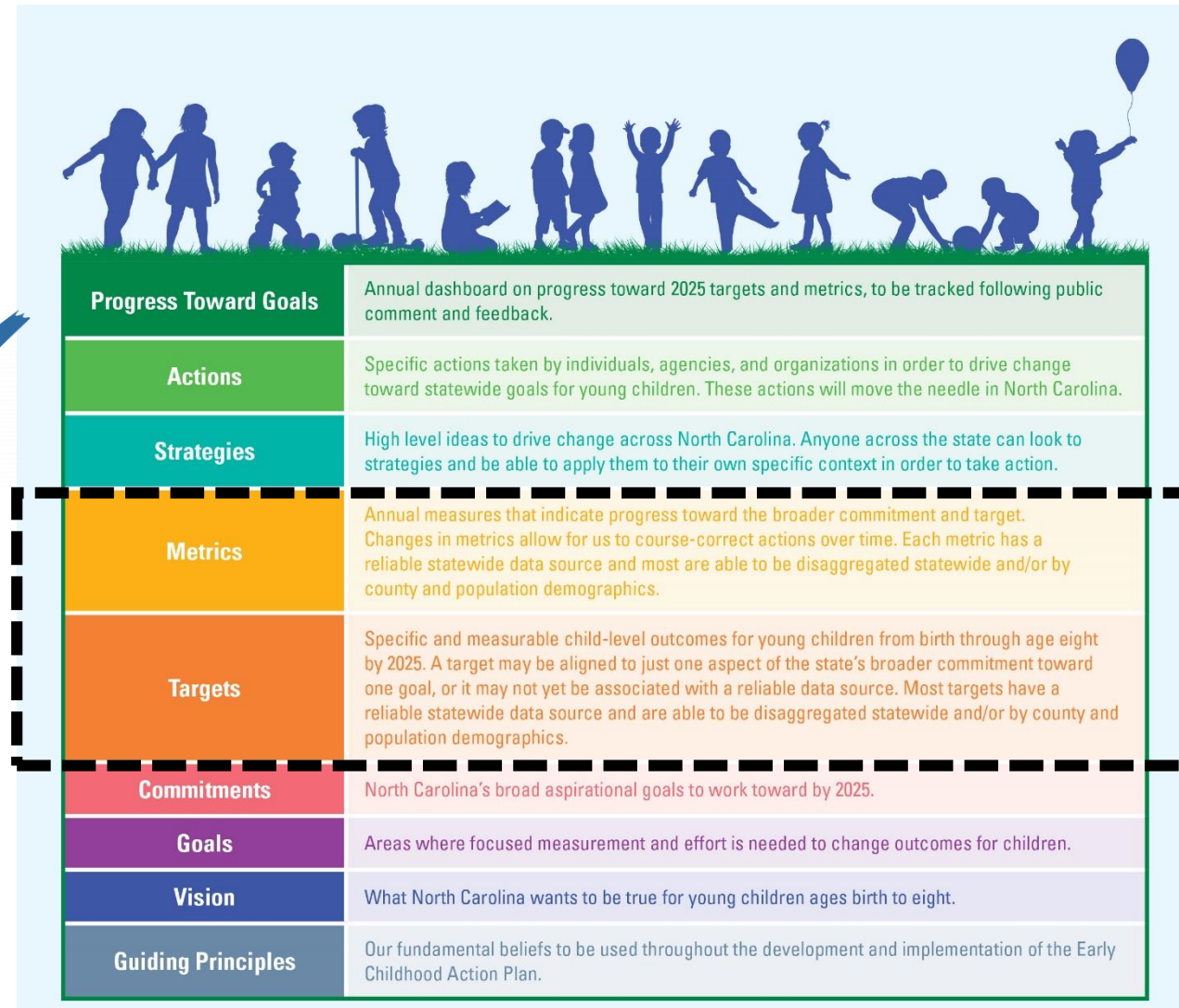


<b>Progress Toward Goals</b>	Annual dashboard on progress toward 2025 targets and metrics, to be tracked following public comment and feedback.
<b>Actions</b>	Specific actions taken by individuals, agencies, and organizations in order to drive change toward statewide goals for young children. These actions will move the needle in North Carolina.
<b>Strategies</b>	High level ideas to drive change across North Carolina. Anyone across the state can look to strategies and be able to apply them to their own specific context in order to take action.
<b>Metrics</b>	Annual measures that indicate progress toward the broader commitment and target. Changes in metrics allow for us to course-correct actions over time. Each metric has a reliable statewide data source and most are able to be disaggregated statewide and/or by county and population demographics.
<b>Targets</b>	Specific and measurable child-level outcomes for young children from birth through age eight by 2025. A target may be aligned to just one aspect of the state's broader commitment toward one goal, or it may not yet be associated with a reliable data source. Most targets have a reliable statewide data source and are able to be disaggregated statewide and/or by county and population demographics.
<b>Commitments</b>	North Carolina's broad aspirational goals to work toward by 2025.
<b>Goals</b>	Areas where focused measurement and effort is needed to change outcomes for children.
<b>Vision</b>	What North Carolina wants to be true for young children ages birth to eight.
<b>Guiding Principles</b>	Our fundamental beliefs to be used throughout the development and implementation of the Early Childhood Action Plan.



# Early Childhood Action Plan Framework

Data -  
Informed  
vs  
Data-  
Driven



# By 2025, all North Carolina young children from birth to age eight will be:

- 1) **Healthy:** Children are healthy at birth and thrive in environments that support their optimal health and well-being
- 2) **Safe and Nurtured:** Children grow confident, resilient and independent in safe, stable and nurturing families, schools and communities
- 3) **Learning and Ready to Succeed:** Children experience the conditions they need to build strong brain architecture and school readiness skills that support their success in school and life







# Healthy

Children are healthy at birth and thrive in environments that support their optimal health and well-being

# Healthy | 2025 GOALS



1. HEALTHY BABIES



2. ACCESS TO PREVENTIVE  
HEALTH SERVICES



3. FOOD SECURITY

# Healthy | 2025 GOALS



## 1. HEALTHY BABIES

**North Carolina will work to decrease disparities in infant mortality, thereby improving overall birth outcomes for all children.**

By 2025, decrease the statewide infant mortality disparity ratio from 2.5 to 1.92, according to data provided by the State Center for Health Statistics

Infant mortality rates, disaggregated by race and ethnicity

Percent of babies born at a low birth weight (<2,500g)

Percent of women 18-44 with preventive health visit in last year

Percent of infants who are ever breastfed

Percent of mothers indicating their pregnancy was intended

Percent of families living at or below 200% of the federal poverty level



# Healthy | 2025 GOALS



## 1. HEALTHY BABIES

Our Commitment

2025 Target

Annual Metrics

North Carolina will work to decrease disparities in infant mortality, thereby improving overall birth outcomes for all children.

# Healthy | 2025 GOALS



## 1. HEALTHY BABIES

Our Commitment

2025 Target

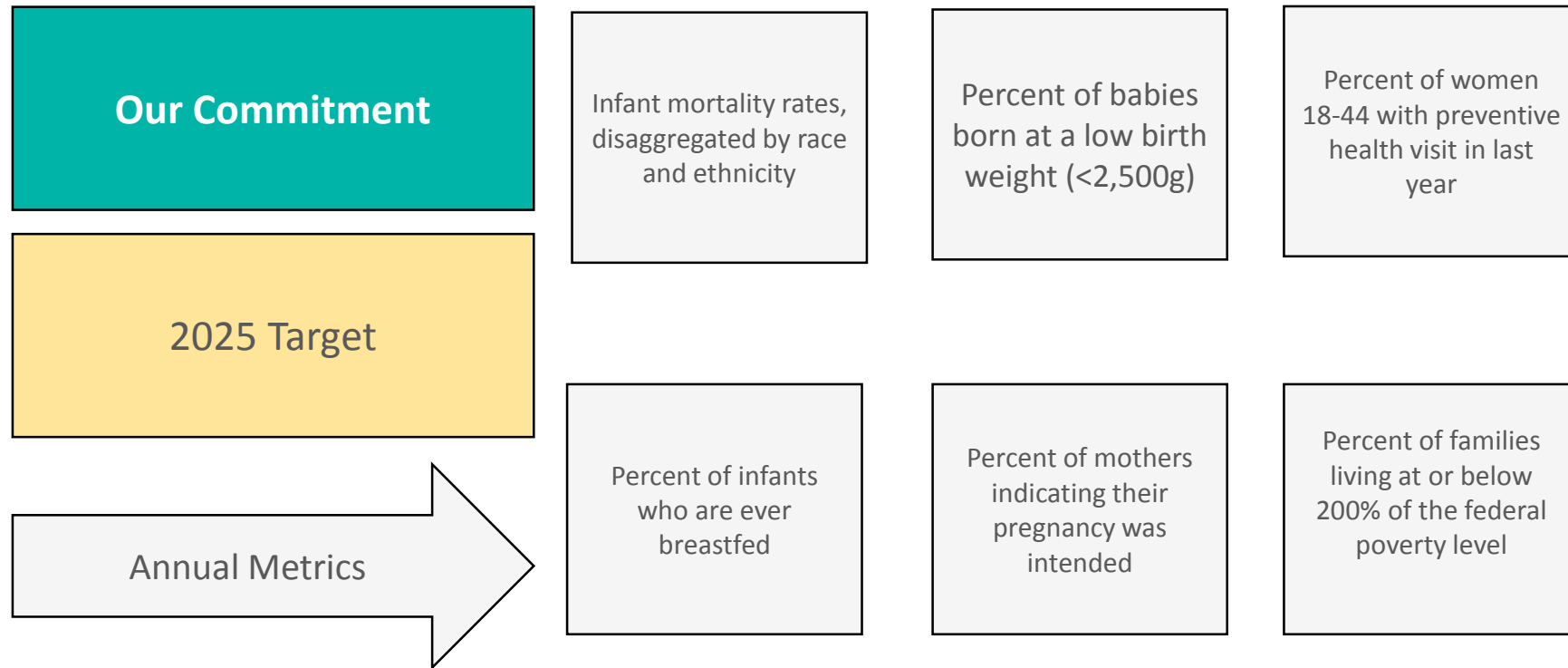
Annual Metrics

By 2025, decrease the statewide infant mortality disparity ratio from 2.5 to 1.92, according to data provided by the State Center for Health Statistics

# Healthy | 2025 GOALS



## 1. HEALTHY BABIES



# Healthy | 2025 GOALS



## 2. ACCESS TO PREVENTIVE HEALTH SERVICES

**North Carolina will work to ensure that all young children receive regular, ongoing access to high-quality healthcare.**

By 2025, increase the percentage of North Carolina's young children enrolled in Medicaid and Health Choice who receive regular well-child visits as recommended for certain age groups, according to data provided through NC Medicaid and HEDIS measures:

- For children ages 0 – 15 months, increase from 61.9% to 68.7%.
- For children ages 3 – 6 years, increase from 69.3% to 78.5%.

Percent of  
individuals with  
health insurance  
(Children +  
adults)

Percent of 19 –  
35 month-old  
children who are  
up-to-date on  
immunizations

Percent of  
children enrolled  
in Medicaid aged  
2 – 10 who had  
an annual dental  
visit

Percent of infants  
who are ever  
breastfed

Percent of  
families living at  
or below 200% of  
the federal  
poverty level

# Healthy | 2025 GOALS



## 3. FOOD SECURITY

**North Carolina will work to ensure that all young children have regular access to healthy foods.**

By 2025, decrease the percentage of children living across North Carolina in food insecure homes from 20.9% to 17.5% according to data provided by Feeding America.

Percent of population that is food insecure, disaggregated by county

Percent of eligible families receiving state and federal supplemental food/nutrition assistance benefits

Percent of children aged 0 – 17 with low access to food

Rates of young children who are obese or overweight

Percent of families living at or below 200% of the federal poverty level





# Safe and Nurtured

Children grow confident, resilient and independent in safe, stable, and nurturing families, schools and communities

# Safe and Nurtured | 2025 GOALS

- **\*In Data D**



4. SAFE AND SECURE HOUSING



5. SAFE AND NURTURING  
RELATIONSHIPS



6. FAMILY STABILITY FOR CHILDREN  
IN FOSTER CARE



7. SOCIAL EMOTIONAL WELL-BEING  
AND RESILIENCE

# Safe and Nurtured | 2025 GOALS



## 4. SAFE AND SECURE HOUSING

**North Carolina will work to ensure that all young children and their families have access to fixed, regular, safe, healthy, secure, and affordable housing, and that services will be provided to meet the developmental and learning needs of children facing homelessness.**

Part 1) By 2025, decrease the percentage of children across North Carolina under age six experiencing homelessness by 10% from 26,198 to 23,578, according to data from the Administration for Children and Families (ACF).

Part 2) By 2025, decrease the number of children K – third grade enrolled in NC public schools experiencing homelessness by 10% from 9,970 to 8,973, according to data provided by the NC Department of Public Instruction (NCDPI).

Percent of young children under age 8 in families with high housing cost burden

Number of homeless children participating education programs

Percent of eligible families receiving diversion and rapid rehousing

Rate of emergency department visits for asthma care for young children

Percent of children aged 6 months – 6 years enrolled in Medicaid receiving lead screening

Percent of families living at or below 200% of the federal poverty level

# Safe and Nurtured | 2025 GOALS



## 5. SAFE AND NURTURING RELATIONSHIPS

**North Carolina will work to ensure that all children across the state have consistent safe relationships with their parents or primary caregivers.**

By 2025, decrease by 10% the rate of children in North Carolina who are substantiated victims of maltreatment

- For children ages 0 – 3, reduce from 20.1 to 18.1 per 1000 children
- For children ages 4 – 5, reduce from 14.5 to 13.1 per 1,000 children
- For children ages 6 – 8, reduce from 13.4 to 12.1 per 1,000 children

All data for this target is provided by the Division of Social Services Central Registry, and NC FAST.

Rate of children who are reported to Child Protective Services for suspected maltreatment

Percent of children with two or more adverse childhood experiences

Rates of screening for mothers post partum

Injury rates documented for children under age 8 in the emergency department

# Safe and Nurtured | 2025 GOALS



## 6. FAMILY STABILITY FOR CHILDREN IN FOSTER CARE

North Carolina will work to ensure that all children in foster care across the state grow up in a home environment with stable, consistent, and nurturing family relationships, whether that is with the child's birth family or through an adoptive family.

Part 1) Reunification: By 2025, decrease the number of days it takes for a child in the foster care system to be reunified with his or her family, if appropriate.

Part 2) Adoption: By 2025, decrease the number of days it takes for a child in the foster care system to be adopted, if reunification is not appropriate.

Percent of cases that are adjudicated within 60 days

Percent of cases that have an initial permanency planning hearing within 12 months of removal from the home

Median number of days to termination of parental rights



# Safe and Nurtured | 2025 GOALS

- **\*In data**



**Development**

## 7. SOCIAL EMOTIONAL WELL-BEING AND RESILIENCE

North Carolina will work to ensure that all children consistently show healthy expression and regulation of emotion, empathy, and a positive sense of self.

By 2025, North Carolina will have a reliable, statewide measure of young children's social-emotional health and resilience at the population level.\*

As these data become available, we will establish prioritized metrics



# Learning and Ready to Succeed

Children experience the conditions they need to build strong brain architecture and school readiness skills that support their success in school and life

# Learning and Ready to Succeed | 2025 GOALS



8. ACCESS TO HIGH QUALITY EARLY  
LEARNING PROGRAMS



9. EARLY DEVELOPMENT



10. READING PROFICIENCY

# Learning and Ready to Succeed | 2025 GOALS



## 8. ACCESS TO HIGH QUALITY EARLY LEARNING PROGRAMS

North Carolina will work to ensure that all families have the opportunity to enroll their young children in high quality, affordable early care and learning programs.

Part 1) By 2025, increase the percentage of income-eligible children enrolling in high quality early care across North Carolina by 10%, according to data provided by the Division for Child Development and Early Education (DCDEE) and Head Start.

Part 2) By 2025, decrease the percent of family income spent on childcare to 7%, according to data provided by ChildCare Aware America

Percent of early childhood teachers with post-secondary early childhood education



# Learning and Ready to Succeed | 2025 GOALS

- **\*In Data Development**



## 9. EARLY DEVELOPMENT

North Carolina is committed to ensuring that all children meet developmental milestones so that they can succeed in school and beyond and that children and families have the tools they need to support early development.

By 2025, increase the percentage of children across North Carolina who enter kindergarten developmentally on-track.\*

Percent of children enrolled in Medicaid receiving general developmental screening in first 3 years of life

Percent of children who receive appropriate and timely early intervention and early childhood special education services to address developmental risks and delays

**\*In Data Development**

# Learning and Ready to Succeed | 2025 GOALS



## 10. GRADE-LEVEL READING

North Carolina will work to increase reading proficiency in the early grade levels for all children, with an explicit focus on African American, American Indian, and Hispanic children who face the greatest systemic barriers to reading success.

Part 1) Increase reading proficiency from 45.8% to 61.8% for 3rd – 8th grade students on statewide end of grade tests (EOGs), consistent with the state’s Every Student Succeeds Act (ESSA) Plan 2025 reading proficiency benchmark

Part 2) Increase reading proficiency from 39% to 43% according to the fourth grade National Assessment of Educational Progress (NAEP)

3rd grade reading  
End of Grade  
(EOG) exams  
proficiency rates

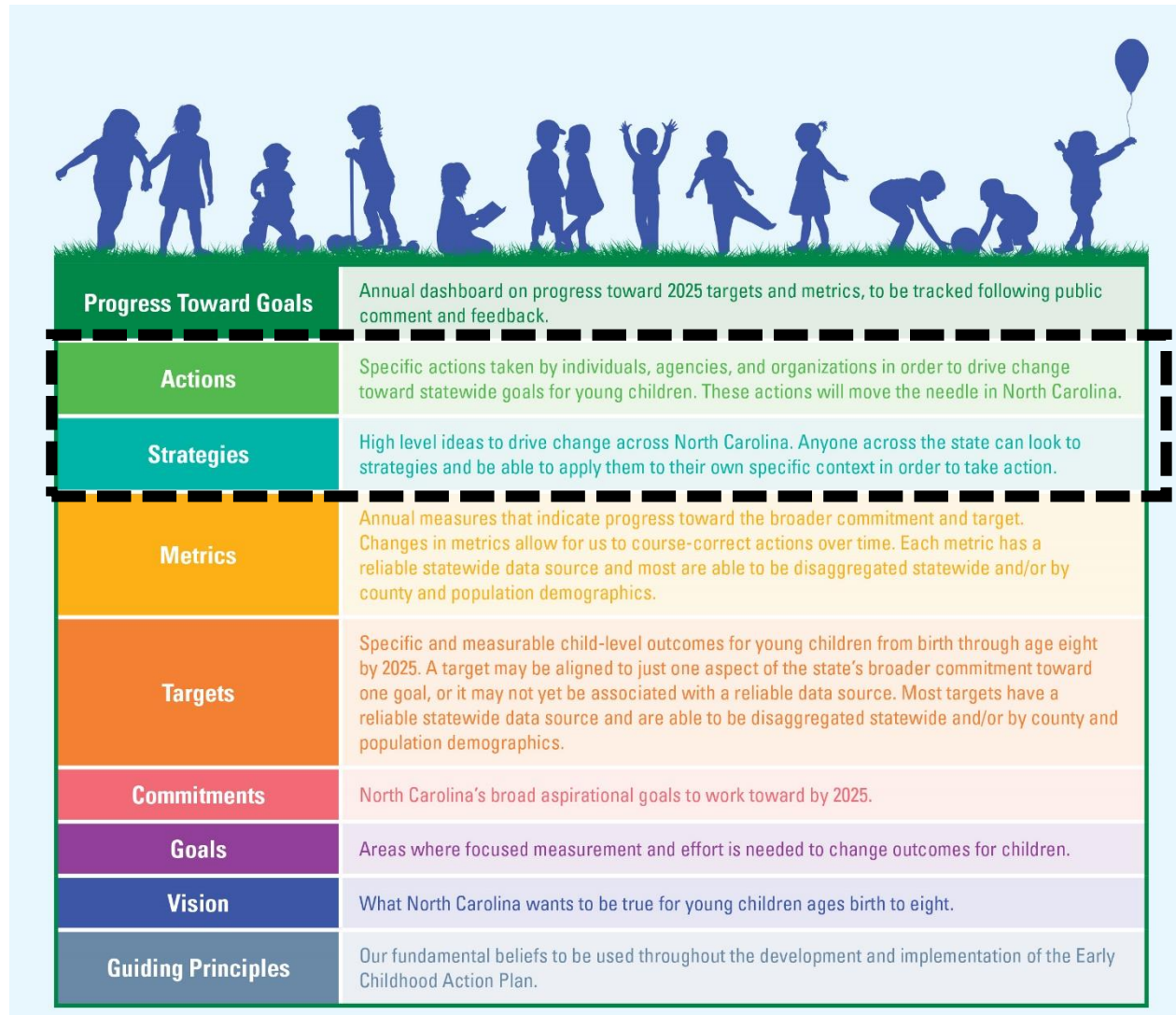
4th grade reading National  
Assessment of Educational  
Progress (NAEP) scores for  
priority populations

Percent of students reading or  
exhibiting pre-literacy behaviors  
at or above grade level by the  
end of the year according to  
mCLASS<sup>®</sup>: Reading 3D<sup>™</sup>

Percent of  
students who are  
chronically absent

Percent of  
families living at  
or below 200% of  
the federal  
poverty level

# Early Childhood Action Plan Framework



# High-Level Recommended Strategies

Where do you see

- **yourself,**
- **your organization, or**
- **your agency**

in the strategies that follow?



# High-Level Recommended Strategies



**1. Build and Sustain Strong Relationships Between Young Children and their Families**



**2. Promote Supportive, Productive, and Equitable Early Learning Environments**



**3. Support the Preparation, Compensation, and Retention of the Early Care and Learning, and Early Elementary Education Workforce**



**4. Make Early Care and Learning Programs More Accessible for Vulnerable Families**



**5. Integrate the Support of Children's Social-Emotional Development into Early Childhood Services**

# High-Level Recommended Strategies



**6. Improve Economic Opportunities for All Families with Young Children**



**7. Prioritize Racial Equity, Cultural Competence, and Family Engagement in Child and Family Systems**



**8. Increase Access to High Quality Health Care for Vulnerable Young Children and their Families**



**9. Promote Healthy Behaviors**



**10. Facilitate Data-Sharing and Collaboration to Support Data-Informed Decision-Making**

# 1. Build and Sustain Strong Relationships Between Young Children and their Families

- Promote evidence-based two generation interventions, such as home-visiting, that address the needs of children and their families; promoting physical health, social-emotional health, child development, parenting education and social support, and address issues such as substance use disorders (e.g. opioids), homelessness, child abuse and neglect prevention, reproductive life planning, and supporting families of children with disabilities.
- Continue to track North Carolina's rates of maternal post-partum depression screening at well-baby visits, and monitor the effectiveness of maternal depression and evidence-based two-generation treatment services.
- Improve the reunification and adoption processes for children in foster care to lessen the amount of time children spend without a permanent family.



## 2. Promote Supportive, Productive, and Equitable Early Learning Environments

- Ensure that learning environments for young children are culturally and linguistically relevant, and free from systemic racism and implicit bias.
- Increase the rigor and responsiveness of birth – third grade teacher and principal preparation programs through strategies such as high entry standards and aligning these programs to evidence-based practices, schools' needs, emerging technologies, and the increasing demands that their students will face in college, work, and life.
- Ensure that young children with disabilities are provided the learning supports they need in the least restrictive classroom environments.



### 3. Support the Preparation, Compensation, and Retention of the Early Care and Learning, and Early Elementary Education Workforce

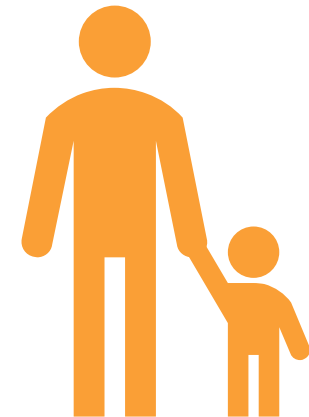
- Attract and recruit qualified individuals into the early care and learning through third grade workforce to alleviate ongoing vacancies.
- Ensure early learning and educator preparation programs in community colleges and universities are high-quality and affordable.
- Establish policies that provide individuals in the early care and learning through third grade workforce with wages that support a high quality of life.





## 4. Make Early Care and Learning Programs More Accessible for Vulnerable Families

- Increase access to childcare subsidies.
- Increase the percent of eligible families who are enrolled in high quality early care and learning programs by funding more slots, expanding program capacity, and increasing reimbursement rates to providers.
- Outreach to vulnerable communities historically underrepresented in, but eligible for, early care and learning programs, including children experiencing homelessness and those in foster care.
- Strengthen the funding for and infrastructural support of the Smart Start network, including quality improvement initiatives that could improve young children's physical health, social-emotional wellbeing, and early intervention.



## 5. Integrate the Support of Children's Social-Emotional Development into Early Childhood Services

- Promote evidence-based approaches appropriate for young children and their families, such as treating families and young children together, and delivering infant and early childhood mental health services in primary care settings and home visits.
- Incorporate infant and early childhood mental health best practices into higher education, training, and workforce preparation programs for a broad array of professionals who support children and family service
- Hire support staff to work with children and families on social-emotional concerns, attendance, and other social determinants of health; Examples include trained school counselors, social workers, school nurses, child care health consultants, school psychologists, behavioral health specialists, literacy coaches, and family advocates in child care and school settings.



## 6. Improve Economic Opportunities for All Families with Young Children

- Create family-friendly employment practices across all sectors, such as paid sick leave, paid parental leave, and reliable work schedules; Especially ensure that these policies are available to low-wage, part-time, and seasonal or occasional workers.
- Increase access to affordable and safe housing for families with young children through efforts such as supporting home loans, increasing funding for vouchers, and incorporating affordable housing into development plans.
- Ensure affordable, accessible, dependable transportation to and from early care and education programs, schools, and health services, especially in rural communities.
- Ensure that parents, especially young parents, are supported in obtaining postsecondary education to improve their ability to increase their incomes.



## 7. Prioritize Racial Equity, Cultural Competence, and Family Engagement in Child and Family Systems

- Be inclusive in planning and designing services for children and families, ensuring there are seats for families of color and youth in order to “design with” instead of “design for.”
- Eliminate or minimize the use of suspension and expulsion in birth-through-third grade classrooms by including cultural competency into disciplinary policy.
- Recruit and retain a diverse workforce of child- and family-facing providers across sectors
- Adopt evidence-based standards for culturally-relevant classroom instruction



## 8. Increase Access to High Quality Health Care for Vulnerable Young Children and their Families

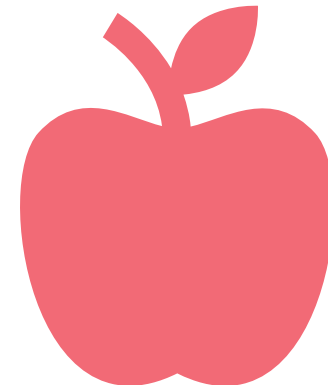
- Close the insurance coverage gap for low-income adults to ensure more regular access to healthcare.
- Facilitate regular visits to primary care providers for women ages 18 – 44, which in turn can help support healthy future pregnancies.
- Provide care coordination and case management services that include promotion of resiliency, mental health screening, substance use intervention, tobacco cessation and prevention, reproductive life planning, and chronic disease management





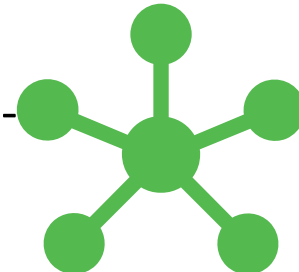
## 9. Promote Healthy Behaviors

- Promote opportunities for physical activity and healthy eating for young children in early care and learning programs, K – 3 classrooms, and at home with their families.
- Encourage breastfeeding-friendly policies and services in local communities.
- Promote opportunities for young children in elementary school to access breakfast and afterschool meals during the school year, as well as opportunities to receive meals on weekends, school breaks, and over the summer.
- Remove systemic barriers that prevent eligible families from enrolling in supplemental food and nutrition benefits programs.



## 10. Facilitate Data-Sharing and Collaboration to Support Data-Informed Decision-Making

- Ensure consistent data are captured electronically for young children and their families throughout Medicaid transformation, such as maternal depression screenings and children's social emotional health.
- Invest in the collection of measures of the social-emotional well-being and resilience of young children at the population level.
- Assess the landscape of the data in NC that describes the experiences that young children birth to age 8 have across settings (e.g., health, education, housing, homelessness, child welfare, etc.)
- Prioritize data around young children's health, well-being, social-emotional development, housing status, and academic performance in the creation of longitudinal data systems.





**Why Now?**

# The Time is Now: NC Early Childhood Action Plan

## Statewide "Read to Achieve" Shows Few Gains

By LIZ SCHLEMMER (/PEOPLE/LIZ-SCHLEMMER) • JAN 10, 2019

## Governor Cooper Signs Executive Order Supporting Women Workers, Healthy Families, Strong Workforce

Executive Order No. 82 Extends Nondiscrimination Protections and Workplace Accommodations to Pregnant Workers, Encourages Strong Economy

## Intervention Still

## NC Child Welfare System Failing Children, Families, Reports Say

June 16, 2016 by [Rose Hoban](#)

Image courtesy apdk, flickr creative commons

## Medicaid Changes Coming into Focus - North Carolina Health News

[northcarolinahealthnews.org/2018/11/28/medicaid-changes-coming-into-focus/](https://www.northcarolinahealthnews.org/2018/11/28/medicaid-changes-coming-into-focus/)

November 28, 2018 by Sarah Ovaska-Few

## Red Hat, SAS leaders push for more slots for students in NC Pre-K

Tags: education, early childhood, pre-K, Wake County Public School System, SAS, Jim Goodnight

Posted 7:27 a.m. Thursday

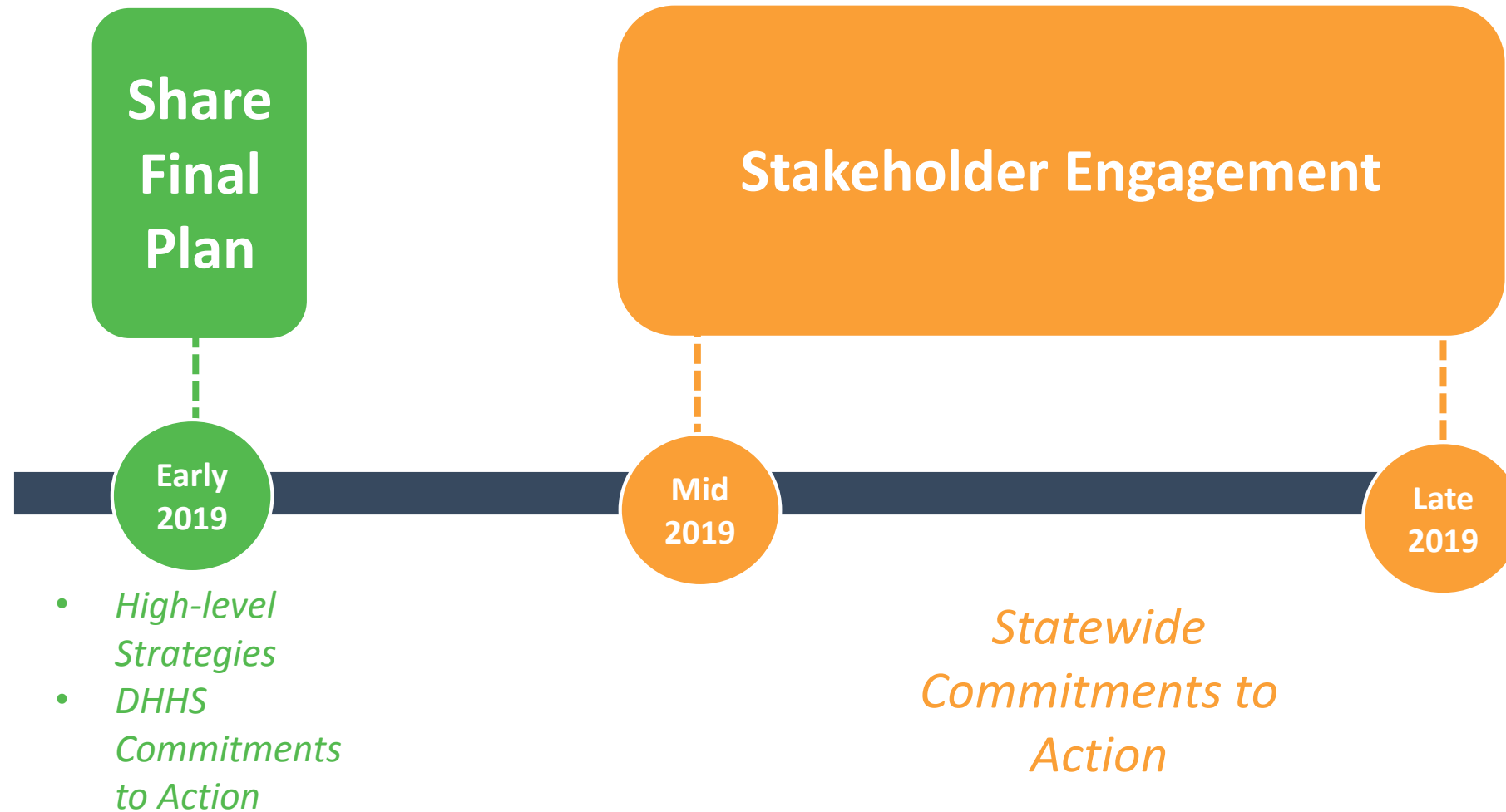
Updated 6:30 p.m. Thursday

# We need YOU to help us reach these goals!





# Strategies & Actions: 2019





**It's Time to Take Action for  
NC's Young Children!**

Visit *[ncdhhs.gov/early-childhood](https://ncdhhs.gov/early-childhood)*